

TESTIMONY OF Ingrid Gillespie, Regional Action Council Director, President, Connecticut Prevention Network

IN FAVOR OF

HB 5487- AN ACT PROVIDING IMMUNITY TO A PERSON WHO ADMINISTERS AN OPIOID ANTAGONIST TO ANOTHER PERSON EXPERIENCING AN OPIOID-RELATED DRUG OVERDOSE

Judiciary Committee Hearing, March 12, 2014

Senator Coleman, Representative Fox and members of the committee; my name is Ingrid Gillespie and I am Director of the Lower Fairfield County Regional Action Council (LFCRAC) covering the communities of Greenwich, Stamford, Darien and New Canaan. I am also President of the Connecticut Prevention Network (CPN) which is an association of the state's 13 community partnership Regional Action Councils (RACs) that work to provide every community in Connecticut with education, training and advocacy for substance abuse prevention and mental health promotion across the lifespan.

In my capacity as President of CPN I want to offer testimony to support HB 5487- AN ACT PROVIDING IMMUNITY TO A PERSON WHO ADMINISTERS AN OPIOID ANTAGONIST TO ANOTHER PERSON EXPERIENCING AN OPIOID-RELATED DRUG OVERDOSE. The bill would provide a person immunity from liability when they administer an opioid antagonist to a person they believe, in good faith, is experiencing an opioid-related drug overdose. The opioid antagonist known as nalaxone or narcan is safe, effective and a life saving intervention for someone experiencing an opioid overdose.

An article in the Connecticut Post on March 10, 2014 outlines the drug overdose problem facing Connecticut. According to the Chief Medical Examiner, heroin overdose deaths increased in Connecticut by 60% from 174 in 2012 to 257 in 2013. With too many unnecessary deaths there is a need for the use of nalaxone which, simply put, can save lives. And as noted by many in recovery from opiate addiction and professionals in the field of addiction, this intervention can save lives and provide an opportunity to access treatment.

CPN supports this life saving intervention known as a harm reduction strategy as part of a more comprehensive effort that includes strategies to address the demand and supply of prescription and illicit opiates.

It is important to note that heroin isn't the only cause for opioid overdose. As noted in the Overdose Prevention Fact Sheet created by the Statewide Overdose Prevention Workgroup, of which CPN is a member, people with chronic pain with legitimate prescriptions may turn to heroin as a cheaper, more accessible option. Children may accidentally ingest prescription medications. Young people going to parties and experimenting may ingest unknown substances. Opioid overdose occurs across all age, gender, ethnic, and geographic strata, and in those using it medically and non-medically (Journal of the American Medical Association Nov 14, 2012: 308(18): 1863-4.)

In summary, the Connecticut Prevention Network asks you to support HB 5487 as a crucial intervention to save lives and important step in overall efforts to address the increase of opiate abuse and addiction.

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